FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

143 4406

# **FORM D**

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	SEC USE ONLY										
Prefix Serial											
	DATE RECEIVED										
	1										

<del>-</del> `	an amendment and name has char	• •	
Private Placement of Limited Partnership I	<del></del>		
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ R	ule 506 Section 4(6) ULOE	Beetion
Type of Filing: New Filing	✓ Amendment		MIC 1 2 2886
		DENTIFICATION DATA	AUG 18 ZUUU
1. Enter the information requested about the	ie issuer		
· ·	an amendment and name has char	ged, and indicate change.)	Washington, DC
Hayman Municipal Opportunities F Address of Executive Offices		C-4-\ Talamb	one Number (Including Area Code)
2626 Cole Avenue, Suite 200,	(No. and Street, City, State, Zip Dallas, Texas 75204		296-4980
Address of Principal Business Operations	(No. and Street, City, State, Zip		
(if different from Executive Offices)	(No. and Street, City, State, Zip	Code) Telephone Number (menud	ing Area Code)
Brief Description of Business			
Investment Partnership Type of Business Organization			
corporation	⊠ limite	ed partnership, already formed	other (please specify):
business trust		ed partnership, to be formed	
Ousiness trust		Month Year	
Actual or Estimated Date of Incorporation	n or Organization:	0 3 0 8	☑ Actu+al ☐ Estimated
lurisdiation of Incompantion or Organiza	rion: (Enter two letter U.S. Bostol	Samiles abbreviation for States DE	DDOORGOUD
Jurisdiction of Incorporation or Organizat	•	Service abbreviation for State. DE	PROCESSED
	CN for Canada; FN for oth	ner foreign jurisdiction)	
GENERAL INSTRUCTIONS			AUG 21 2008
		TLI	ORACON DELITERA
Who Must File: All issuers making an offering of securiti	es in reliance on an exemption under Regulati	ion D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.	MANDON KENIEKS
when to rite: A notice must be filed no later than 15 da	lys after the first sale of securities in the offe	ring. A notice is deemed filed with the U.S. Securities and is due, on the date it was mailed by United States registered	Exchange Commission (SEC) on the earlier of the date it is
Where To File: U.S. Securities and Exchange Commission			
Copies Required: Five (5) copies of this notice must be fi signatures.	led with the SEC, one of which must be man	nually signed. Any copies not manually signed must be phot	ocopies of the manually signed copy or bear typed or printed
Information Required: A new filing must contain all information previously supplied in Parts	ormation requested. Amendments need only	report the name of the issuer and offering, any changes the filed with the SEC.	ereto, the information requested in Part C, and any material
Filing Fee: There is no federal filing fee.			
must file a separate notice with the Securities Administra	tor in each state where sales are to be, or hav		and that have adopted this form. Issuers relying on ULOE recondition to the claim for the exemption, a fee in the proper f this notice and must be completed.
	e will not result in a lo	esult in a loss of the federal exemptors of an available state exempt	
	information contained in this form are not	required to respond unless the form displays a currently val	
Potential persons who are to respond to the collection of			SEC 1972 (2-97)
rotential persons who are to respond to the collection of			SEC 1972 (2-97)
Potential persons who are to respond to the collection of			SEC 1972 (2-97)
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rotential persons who are to respond to the collection of			SEC 1972 (2-97)



			A. BASIC IDENTIFI	CATION DATA		
2.	Enter the information r	equested for the fo	ollowing:			
X X	Each beneficial owner issuer;	having the power	has been organized within the p to vote or dispose, or direct the	vote or disposition of, 10% or		
X			rporate issuers and of corporate	general and managing partner	s of partnership is	ssuers; and
X Ch	Each general and mana eck Box(es) that Apply:		Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or
Ha	l Name (Last name first, yman Municipal Strate siness or Residence Addi	gies, LLC, Gener	al Partner Street, City, State, Zip Code)			Managing Partner
	6 Cole Avenue, Suite 2				_	
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Nit	l Name (Last name first, av Batavia, Managing	Member of the G				
	siness or Residence Addi 26 Cole Avenue, Suite 2		Street, City, State, Zip Code)			
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	l Name (Last name first, vin Phillips, Managing		eneral Partner			<u> </u>
	siness or Residence Adda 26 Cole Avenue, Suite 2		Street, City, State, Zip Code)			
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bus	siness or Residence Add	ress (Number and	Street, City, State, Zip Code)			
Che	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bus	siness or Residence Addi	ress (Number and	Street, City, State, Zip Code)			
Che	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bus	siness or Residence Addi	ess (Number and	Street, City, State, Zip Code)			
Che	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				<u> </u>
Bus	siness or Residence Addi	ress (Number and	Street, City, State, Zip Code)			

								<u> MATIO</u>						
1. Ha	is the iss	suer sold	l or does A					accredite n 2, if fil				ing?	Yes □	No ⊠
2. W													\$ <u>50,0</u>	00.00
3. Do	3. Does the offering permit joint ownership of a single unit:												Yes ⊠	No □
ind of rep (5)	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Na	me (Las	t name 1	first, if ir	ndividua	i)									
Busines	s or Res	sidence.	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Co	de)					
Name o	f Assoc	iated Br	oker or I	Dealer		•								
			Listed F								*********			Ali States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Las	t name f	îrst, if ir	idividua	l)	-								
Busines	s or Res	sidence A	Address	(Numbe	r and St	rect, Cit	y, State,	Zip Co	de)					
Name o	f Associ	iated Br	oker or I	Dealer				·						
			Listed F						sers					
			check inc											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Las	t name f	irst, if in	dividua	l)			•			·		<u> </u>	
Busines	s or Res	sidence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)			•		
Name o	f Associ	iated Bro	oker or I	Dealer										
			Listed Hocheck inc											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	(ID)		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[KI]	[DA]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA)		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

	offered for exchange and already exchanged.  Type of Security	Aggrega	te	An	nount Already
	. , , , , , , , , , , , , , , , , , , ,	Offering P			Sold
	Debt	\$ <u> </u>		\$	0
	Equity	\$0		\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$ 0		\$	0
	Partnership Interests	-	!	\$ 27	,891,122
	Other (Specify)			\$	0
	Total			\$ 27	,891,122
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				
		Numbe Investor		D	Aggregate ollar Amount of Purchases
	Accredited Investors	12		\$ <u>27</u>	,891,122
	Non-accredited Investors	0		\$	0
	Total (for filings under Rule 504 only)	N/A		\$	N/A
	Total (for filings under Rule 504 only)	N/A		\$	N/A
3.	· · · · · · · · · · · · · · · · · · ·	N/A		\$	N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in	Type of		·-	N/A  ollar Amount  Sold
3.	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			·-	ollar Amount
3.	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering	Type of Security N/A		Do	ollar Amount Sold
3.	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A		Do:	ollar Amount Sold N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A		Do \$	ollar Amount Sold N/A N/A
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A N/A arities in mation may an	y 	Dx \$\$	ollar Amount Sold N/A N/A N/A N/A
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505  Regulation A  Rule 504  Total  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the secuthis offering. Exclude amounts relating solely to organization expenses of the issuer. The inform be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.  Transfer Agent's Fees	Type of Security N/A N/A N/A N/A N/A arities in lation may an		Dx \$\$\$\$\$	ollar Amount Sold N/A N/A N/A N/A
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A N/A arities in leation may an an		Dx \$\$	ollar Amount Sold N/A N/A N/A N/A
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A N/A arities in hation may han		\$\$ \$\$ \$\$	ollar Amount Sold N/A N/A N/A N/A 0 0 5,000
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A nrities in mation may		Dx \$\$\$\$\$\$\$\$\$	ollar Amount Sold N/A N/A N/A N/A 0 0 0 5,000
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A nrities in lation may an		\$\$ \$\$ \$\$	ollar Amount Sold N/A N/A N/A N/A 0 0 0 5,000 0
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A arities in leation may an an		\$\$ \$\$ \$\$	ollar Amount Sold N/A N/A N/A N/A  0 0 5,000 0 0 0
	Answer also in Appendix, Column 4, if filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering  Rule 505	Type of Security N/A N/A N/A N/A arities in hation may han		\$\$ \$\$ \$\$	ollar Amount Sold N/A N/A N/A N/A 0 0 0 5,000 0

C. OFFERING PRICE, I	NUMBER OF INVESTORS, EXPENSES	AND USE	OF PR	OCEEDS	8
and total expenses furnished in response to	ate offering price given in response to Part C-Que Part C-Question 4.a. This difference is the "adju	sted gross			\$ <u>27,886,122</u>
each of the purposes shown. If the amount	gross proceeds to the issuer used or proposed to be for any purpose is not known, furnish an estimate the total of the payments listed must equal the adju- to Part C-Question 4.b. above.	e and			
			Öi Dire	ments to fficers, ectors, & filiates	Payments To Others
Salaries and fees			\$		\$
Purchase of real estate			\$		\$
Purchase, rental or leasing and instal	lation of machinery and equipment		\$		\$
Construction or leasing of plant build	lings and facilities		\$		\$
	uding the value of securities involved in this offer its or securities of another issuer pursuant to a me		\$		\$
Repayment of indebtedness			\$		\$
Working capital			\$	□	\$
Other (specify) (investments)			\$	X	\$ <u>27,886,122</u>
Column Totals			\$	X	\$ <u>27,886,122</u>
Total Payments Listed (column totals	s added)	······		\$ <u>27,</u>	886,122
	D. FEDERAL SIGNATURE				
gnature constitutes an undertaking by the issuer	d by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange Concredited investor pursuant to paragraph (b) (2) of	ommission,	filed und	der Rule 50 itten reques	5, the following at of its staff, the
Issuer (Print or Type) Hayman Municipal Opportunities Fund (AI), L.P.	Signature	Date August 1	1. 2008		
Name of Signer (Print or Type)	Title of Signer (Print or Type)	1 22-8-21	,		
Christopher E. Kirkpatrick	Authorized Signatory				
	ATTENTION				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

		E. STATE SIGNATURE						
1.	• • •	resently subject to any of the disqualification prov		Yes	No ⊠			
	See Appendi	x, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o fumish to any state administrator of any state in by state law.	which this notice is	filed, a notice	on Form D			
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written	request, information	furnished by t	he issuer to			
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.						
	e issuer has read this notification and knows t dersigned duly authorized person.	he contents to be true and has duly caused this no	tice to be signed on i	ts behalf by th	e			
	uer (Print or Type) yman Municipal Opportunities Fund (AI),	Date August 11, 2008						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			·			
Ch	ristopher E. Kirkpatrick Authorized Signatory							

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### **APPENDIX**

1		2	3	:	4			5		
	non-acc investor (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL		<del> </del>					· · · · · · · · · · · · · · · · · · ·			
AK										
AZ										
AR										
CA										
СО										
СТ										
DE										
DC				<del></del>						
FL										
GA										
ні										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD										
MA										
MI										
MN										
МО										

#### **APPENDIX**

1		2	3		4			5			
	non-acc investor (Par	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount				
MS		No	Limited Partnership Interests \$150,000	1	\$150,000	0	\$0	No .			
MT							. — .				
NE											
NV											
NH											
NJ											
NM											
NY											
NC											
ND											
ОН											
ок											
OR					<u> </u>						
PA											
RI											
SC											
SD	<del>- V-2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -</del>										
TN											
тх		No	Limited Partnership Interests \$26,291,122	10	\$27,341,122	0	<b>\$</b> 0	No			
UT		No	Limited Partnership Interests \$400,000	1	\$400,000	0	\$0	No			
VT											

## APPENDIX

1		2	3		5			
	non-actinvestor (Pa	-accredited offering price					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
VA								
WA	l.						•	
WV								
WI			· · · · · · · · · · · · · · · · · · ·					
WY								
PR								

